FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, Estimate hours pe

OMB APPROVAL					
OMB Number: 3235-0076					
Expires:	April	30,2008			
Expires: April 30,2008 Estimated average burden					
hours per response 16.00					

SEC USE ONLY					
Serial					
EIVED					
1					

Name of Offering (check if this is an amendment and name has characteristic of Class B Non-Voting Common Stock to Key Employe	• .		SEE Mail Processing
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Type of Filing: New Filing Amendment		ULOE	Section
A. BASIC IDE	ENTIFICATION DATA		JAN 17 2008
Enter the information requested about the issuer		· · · · · · · · · · · · · · · · · · ·	
Name of Issuer (check if this is an amendment and name has change	ed, and indicate change.)	·	Washington, DC
Gain, Inc.			101
Address of Executive Offices (Number and	Street, City, State, Zip Code)	Telephone Numb	er (Including Area Code)
8003 Franklin Farms Drive, Richmond, Virginia, 23229-5107		804-525-2222	
(if different from Executive Offices)	d Street, City, State, Zip Code)	Telephone Num	ber (Including Area Code)
Brief Description of Business PROCESSED			
Marketing Services JAN 2 5 2008	1		
Type of Business Organization corporation business trust THOMSON limited Parties of the first of the firs		please specify):	A JERNIK ROJEL PRITE RAJIR OTRUS FIRIR ISTAT ANNA EM
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Post		mated e:	08022256
Federal: Who Must File: All issuers making an offering of securities in reliance on an array of the securities of the s	n exemption under Regulation D	or Section 4(6), 17 CF	R 230,501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first and Exchange Commission (SEC) on the earlier of the date it is received by which it is due, on the date it was mailed by United States registered or complete the second sec	y the SEC at the address given b		
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Stre	ect, N.W., Washington, D.C. 20	549.	
Copies Required: Five (5) copies of this notice must be filed with the SE(photocopies of the manually signed copy or bear typed or printed signatur	C, one of which must be manualles.	y signed. Any copies	not manually signed must be
Information Required: A new filing must contain all information requeste thereto, the information requested in Part C, and any material changes from not be filed with the SEC.	ed. Amendments need only repo the information previously suppl	rt the name of the iss lied in Parts A and B.	uer and offering, any changes Part E and the Appendix need
Filing Fee: There is no federal filing fee.			
State: This notice shall be used to indicate reliance on the Uniform Limited Of JLOE and that have adopted this form. Issuers relying on ULOE must are to be, or have been made. If a state requires the payment of a fee as accompany this form. This notice shall be filed in the appropriate state his notice and must be completed.	file a separate notice with the S s a precondition to the claim fo	Securities Administra r the exemption, a fe	ator in each state where sales e in the proper amount shall
Δ	TTENTION		
Failure to file notice in the appropriate states will not resul		remntion Conver	selv failure to file the

appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the

filing of a federal notice.

		A. BASIC IDI	ENTIFICATION DATA		
2. Enter the information re	quested for the fol	lowing:			
 Each promoter of t 	he issuer, if the iss	uer has been organized w	rithin the past five years;		
 Each beneficial ow 	ner having the pow	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
• Each executive off	icer and director o	f corporate issuers and of	corporate general and mar	naging partners of	partnership issuers; and
• Each general and r	nanaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, i Trost, Peter A. III	f individual)				
Business or Residence Addre 11 River Road, Richmon	,		ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Trost, P. Collin	f individual)				
Business or Residence Addre	•	• • • • • • • • • • • • • • • • • • • •	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Arnest, Erin K.	f individual)		<u>. </u>		
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
14018 Riverdowns North	Mews, Midlothia	n, Virginia, 23113-378	35		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)		· · · · · · · · · · · · · · · · · · ·		
Sweeney, James F.					
Business or Residence Addre 13919 Lothian Trail, Midl		• • • • • • • • • • • • • • • • • • • •	ode)	1000000	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	*		, "	
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
		· · · · · · · · · · · · · · · · · · ·			

B. INFORMATION ABOUT OFFERING													
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							.,	Yes	No 🗷			
	Answer also in Appendix, Column 2, if filing under ULOE.								_ 200	,000.00			
2.	2. What is the minimum investment that will be accepted from any individual?							••••		No			
3.			permit joint									Yes	NO.
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful	ll Name (l	Last name	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	umber and	l Street, Ci	ty, State, Z	Cip Code)						
Nai	me of Ass	sociated Bi	oker or Dea	aler		-							
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers					<u>.</u>	
	(Check	"All States	s" or check	individual	States)		***************************************	********	•••••				States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Ful	II Name (Last name	first, if indi	ividual)		•				,			
Bu	siness or	Residence	Address (N	Number an	d Street, C	ity, State,	Zip Code)						
Na	me of As	sociated Bi	oker or De	aler				· · · · · ·					
Sta	ites in Wh	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)		****************				***************************************	□ AI	States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	II Name (Last name	first, if indi	ividual)									
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)							☐ Al	l States					
	AL AK AZ AR CA CO CT DE DC FL GA IL IN IA KS KY LA ME MD MA MI MN MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI							HI MS OR WY	ID MO PA PR				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	S	\$
	Equity	600,000.00	\$_600,000.00
	☑ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	_ \$
	Partnership Interests	s	_ S
	Other (Specify)	S	
	Total	600,000.00	\$ 600,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases \$ 600,000.00
	Accredited Investors		\$ 600,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	3	\$_600,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		
	Regulation A		<u> </u>
	Rule 504		\$
	Total	 -	\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees] \$
	Printing and Engraving Costs] \$
	Legal Fees] s
	Accounting Fees] \$
	Engineering Fees		-]
	Sales Commissions (specify finders' fees separately)] \$
	Other Expenses (identify)		-]
	Total	_	s 0.00

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF I	PROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$
5.	Indicate below the amount of the adjusted gross preeach of the purposes shown. If the amount for an check the box to the left of the estimate. The total o proceeds to the issuer set forth in response to Part	ly purpose is not known, furnish an estimate and fthe payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		s	. 🗆 \$
	Purchase of real estate			. 🗆 \$
	Purchase, rental or leasing and installation of made and equipment	chinery	s	. 🗆 \$
	Construction or leasing of plant buildings and fac			
	Acquisition of other businesses (including the val offering that may be used in exchange for the asso issuer pursuant to a merger)	ets or securities of another	□ \$. 🗆 \$
	Repayment of indebtedness			
	Working capital			
	Other (specify):			
			\$. [] S
	Column Totals	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	s 0.00	\$_600,000.00
	Total Payments Listed (column totals added)	<u>\$ 600,000.00</u>		
		D. FEDERAL SIGNATURE		
sig	issuer has duly caused this notice to be signed by the lature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Commis	ssion, upon writte	
lss	er (Print or Type)	Signature	Date	
Gá	in, Inc.	Vita Troit	January 11, 200	8
	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
Pet	er A. Trost III	President		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)